

President.—The question before the House is that a Demand for Rs. 1,16,616 under XXXII—Uplift of the Depressed Classes be voted by the House.

Motion carried.

**24. Uplift of the Depressed Classes—Cranganur—
Rs. 2,260.**

Mr. I. N. Menon.—Sir, I rise to move again for a grant of Rs. 2,260 under "Uplift of the Depressed Classes"—Cranganur. I beg that this House will be pleased to sanction this allotment.

Motion put and carried.

XXII—Medical—Rs. 3,28,243.

Dr. D. Raghavendra Rao.—Sir, I rise to move for an allotment of Rs. 3,28,243 under "22-Medical" for the year 1107. The budget estimate for 1106 was Rs. 2,74,746 and the revised estimate came up to Rs. 2,82,416. The enhanced allotment that is now requested for is mainly due to the increase under the following heads:—

1. Under establishment consequent to the proposed appointment of one more European Nursing Sister in the General Hospital on Rs. 50.
2. Eight midwives to be attached to the several Rural Dispensaries of the State.
3. Ten pupil nurses proposed to be entertained for being trained in the General Hospital on Rs. 15 each in order to supply trained nurses to all the Taluk hospitals.
4. Ten pupil midwives proposed to be trained so that there may be more trained women available to attend on the rural population.
5. One clerk to be entertained in the office to cope with the increased amount of work.
6. An extra compounder.
7. Eight servants on Rs. 12.
8. Sixteen servants on Rs. 11.
9. An enhanced grant of Rs. 6,000 under dietary in order to provide for the increasing number of patients seeking admission in the several hospitals, specially the mofussil ones, consequent on the better equipment and also due to the appreciation of the facilities provided therein by the suffering public.
10. There is a slight increase of Rs. 1,000 requested under bedding and clothing in order to provide for more clothes to patients who are seeking admission, as also due to the increased accommodations available now consequent to the construction of additional ward in the Trichur Civil Hospital and emergency wards in some of the dispensaries.

11. The increase of Rs. 1,900 to meet the additional expenditure to be incurred for sending one of the Lady Apothecaries for higher studies in medicine and surgery to England.

12. The increase under remuneration to the Radiologic staff is due to the anticipated increase in income, under that head.

13. It will be noticed that there is an increase under furniture. This amount is intended to provide for better seating arrangements to patients who attend the several hospitals and dispensaries in the State, to provide for bed head teapots for patients, to provide almirahs and racks for storing drugs, bedding and clothing, etc., in the several institutions.

In the Mental Hospital the entertainment of a few more attendants to look after the patients and the appointment of a clerk have contributed to the slight increase under establishment.

Leper Asylum.—Under this sub-head there are fixed recurring charges which have to be paid to the Salvation Army as also the increased allotment under dietary due to the increase in the number of patients. There are at present about 200 patients as against 120 patients taken to Adoor from Venduruthy. Further, provision is made to tackle the problem of treating the lepers in the whole State specially in the early stage of the disease by establishing centres for their treatment in properly constructed sheds situated near some of the hospitals and dispensaries in the State.

I am happy to inform this House that the Salvation Army is managing this institution in a very satisfactory manner and I have personally satisfied myself about the kind treatment meted out to them during my several visits to the place.

Rural Dispensaries.—There is an increased allotment requested under this head. Three more dispensaries are to be started in the ensuing year and proposals are submitted to Government for starting a few itinerating dispensaries in some of the malarial tracts of the State in Mukundapuram and Chittur Taluks. A scheme for improving every one of the institutions under the department has been forwarded to Government and works will be carried out as funds permit. Unfortunately due to the severe financial depression Government could not embark on this plan to any great extent during the coming year. But still it will be noticed that an up-to-date laboratory for doing Bacteriological work will be constructed in 1107. Facility for preparation of Vaccines carrying on Bacteriological examinations, Water analysis and such other useful works will be provided for. An officer of the grade of an Assistant Surgeon

has been specially trained at the King Institute, Guindy to take charge of this institution.

Honorary Staff.—The system of introducing Honorary Medical Men from out of the independent medical profession has been introduced and orders have already been passed to bring it into effect from the ensuing year. Proposals for the deputation of a Special Medical Officer to go from house to house and treat malarial patients in the town of Chittur, proposals for an anti-malarial survey of the Chittur Taluk to be carried on by experts from Madras, and proposals for carrying on a Hook Worm Campaign in the coastal regions are all under consideration and will be put into effect without further delay. In spite of the fact that there is severe financial depression all round and consequent shrinkage of revenue threatening the Government, I am happy to note that the Diwan has been kind enough to allot about Rs. 50,000 more towards the expenditure in this department. This is positive proof of the sympathetic attitude of the Government towards the suffering humanity, if ever one were wanted.

In the general discussion of the budget one of the Members of this House referred to the increase in the number of deaths in hospitals. He omitted to mention the number of patients treated therein. In the year 1104 there were 12,593 in-patients treated of whom 580 died. In the year 1105, 13,544 patients were treated of whom 700 died. And in the 11 months of the current year 12,311 patients were treated of whom 675 died. It may also be mentioned that in the year 1104 the total number of persons treated was 5,88,088. In 1105 it went up to 6,07,675 and during the 11 months of the current year 6,13,894 were treated. I do not wish to take any pride or credit to the increase in number. From these figures one need not come to the conclusion that the sanitary condition of the State is precipitately going down. No doubt the general health in our towns may not be as good as is desirable. This is partly due to congestion and partly due to the rapidly increasing population in these towns which have not expanded in the same proportion. This is a matter completely in the hands of Municipal administration who have to take drastic measures in granting permission to construct dwelling houses.

As regards rural sanitation, the department has started education propaganda on health matters by means of lantern lectures which are being delivered by the Sanitary Inspectors. The fact that patients are increasingly resorting to hospitals and dispensaries is itself a proof, if ever one is wanted, of the increasing popularity of these institutions. As regards the deaths, I

wish to bring to the notice of this House that everyone here knows very well that it is only patients in a very advanced state of illness that resort to hospitals. It is only after all other methods of treatment, from an Ayurvedic Physician or a sourcerer, have failed that patients are brought to hospitals for treatment. Under the above state of circumstances that is in vogue it is only natural that there will be a good number of deaths for which it is no use to blame the officers in charge of hospitals. The Member for Pazhayannur made mention of want of accommodation in the General Hospital, Ernakulam. I am glad, nay happy to see that the opinion of this House is swinging around in favour of Ernakulam. No doubt, the Trichur Hospital requires a lot of improvement and all suggestions to improve that institution have been made and these will be carried out at the earliest opportunity possible. Arrangements will be made after consulting the views of the Pasteur Institute at Coonoor for anti-rabic treatment at the Trichur Hospital to save the inconvenience to the public. The spare X-Ray out-fit in the General Hospital will be transferred to the Civil Hospital, Trichur, when the town of Trichur has a general electric supply. An Ophthalmic Out-patient department has already been opened there and an Assistant Surgeon with special experience in Eye work is already doing good work there. Special Eye Wards will also be put up when the general scheme is put into effect.

Medical supply:—Every effort is made to purchase the best quality of drugs at the cheapest market direct from Europe and special endeavour is made to purchase in whole sale quantities. But this requires a building to locate a central medical store. For want of funds this work could not be budgetted in 1107.

I am afraid the time has come when we shall have to cry halt and take stock of things. Instead of multiplying the institutions which cannot be stocked well with necessary equipment, drugs, etc., I would suggest concentrating our attention to the existing institutions and improving them in every way as regards their supply and equipments thus giving better attention to these places than scattering poor type of medical aid in badly equipped places and frittering our meagre resources. I have to touch upon one other subject, and that is the supply of free medicines to all who resort to hospitals and dispensaries. It is not possible to dispense medicines to all people irrespective of their being rich or poor. The well-to-do classes should willingly bear a certain part of the burden and lighten that of the State. Our State stands supreme regarding medical aid when compared with the other States in India. Compared with its extent, we have very many institutions and I do not want to say much in praise of them.

With these words, I request the House to vote the grant requested for.

Motion No. 1.

As the following motion was not moved it was considered withdrawn.

Mr. George Chakkyamuri.—*To reduce the allotment of Rs. 41,867 for Establishment by Re. 1.*

Motion No. 2.

Mr. E. Ikkanda Warriar.—*To reduce the allotment of Rs. 41,867, for Establishment by Re. 1.*

Mr. E. Ikkanda Warriar.—Sir, my object in tabling this motion is to discuss the principle of recruitment for the Civil Surgeon's post. I brought this subject before this House during the budget discussion last year, but I am afraid that on account of some impending appointments, this House did not give its dispassionate consideration then. I, therefore, propose to bring that question again and I hope that the atmosphere now is very calm for a cool consideration of the subject. There does not seem to be an irrevocable rule that persons with European qualifications should alone be appointed as Civil Surgeons. But that rule seems to have gained some vogue in the department. In answer to one of the questions answered in the Council, the then Chief Medical and Sanitary Officer seems to have said in this way. 'It would be injustice again to put these men with European qualifications over the heads of men who have professional experience which I value much more than diplomas. It would have been an injustice to those whom I have now deputed to carry on the work'. And he has also in another place in answer to some other questions, stated that there is no fixed rule or settled rule in the department which says that only English qualified men should be employed as Civil Surgeons. My submission is that, as matters now stand, it would appear that the Government is guided by that principle and I understand there are instances in which the claims of some are overlooked, on the mere ground that they do not possess English qualifications. My submission Sir, is that it is a very hard rule and it will be punishing those who cannot really afford to go to England and get themselves qualified. In the words of the Hon'ble Member for Medicine, professional experience and ability alone should count with the Government in filling up such posts. There are persons here who are qualified, who possess degrees from Indian Universities which enable them to practice in England. But at the same time, those persons are not given preference, because they do not possess an English degree or diploma. Sir, this is a very hard rule and I submit that it

should be done away with at once. The rule is not in vogue either in British India or Travancore. There is absolutely no reason why we should have such a rule. It is not the English qualification alone that makes a man competent. The examples of Doctors Rangachary and Guru Swami are eloquent testimony to show that without English qualifications or European qualifications persons can attain to the highest professional efficiency. It is for these reasons, that I move this cut. I request this House to give a dispassionate consideration to this question.

President.—We will adjourn.

The House rose for lunch at 2 p. m. and met again at 3 p. m. with the Deputy President in the Chair.

Mr. A. Sankara Puduval.—Sir, I would support this motion. Government has repeatedly assured us, that other things being equal, Medicoes with European qualifications would not be preferred to Medicoes with Indian qualifications. In the case of Assistant Surgeons, of approved capacity and character, the way in which the rules have been worked has been very unsatisfactory. One would have thought that if the Government had a fascination for European qualifications, these Assistant Surgeons would have been given the option of proceeding to Europe and getting themselves duly qualified. Even that option has not been given to them and men with less experience are seen to have been promoted over Assistant Surgeons with Indian qualifications and of approved capacity. Instances of this kind generally generate discontent among the staff and the efficiency of the Department is bound to suffer. The grading of salaries also, the difference, the great difference, among the salaries of the Head of the Department, of the Civil Surgeons and of the Assistant Surgeons also calls for notice. With these words, I support this motion.

Mr. C. A. Ouseph.—I support the motion Sir. We realise that it is in the interests of the people, especially the suffering ones that the Government has provided the rules for the selection of these officers. The rule in question is that Civil Surgeons ought to be drafted from Europe-returned medical men. We appreciate the idea underlying the rule. The idea seems to me to be that men who return with European qualifications would generally be superior professionally than men qualified in India. But that may not always be the case. We are not wanting in instances where men returning with English, or German or other European qualifications or with American qualifications for the matter of that, have proved absolute failures in the profession. And we have also famous examples of distinguished men who have not had occasion to leave the shores of India.

I need only refer in this connection to the late Head of this Department itself. In framing any such rule the Government should see that the rule does not keep out sufficiently experienced men, men with all the necessary qualifications, from rising to positions that ought to be open to them, simply because of the fact that they had not either cared or they were not able to get some passports from English Universities or English Medical Schools. I believe the Government would also agree with me when I say that in passing the rule they had never the idea of keeping out men who had sufficient experience, men who had all the necessary qualifications. But the rule as it stands now, keeps out such men, men who are educated in India from rising to the grade of Civil Surgeons. That is a great piece of injustice. That ought to be removed. For some reason or other, without knowing the views of the public, Sir, T. Vijayaraghavacharia laid down this rule. The rule has been in force for some time now. It is high time to abolish these rules and hold out these appointments—these two or three higher appointments—in the Medical Service—for really deserving men to aspire to. When I say this, I do not mean that the post of Civil Surgeons should be given to men in service in the order of seniority. There is discretion always vested in the Government to see that only deserving men are promoted.

Mr. K. Ayyappan.—May I know, Sir, whether there is a rule to the effect complained of?

Dr. D. Raghavendra Rao—Yes, Sir. For the information of the House I shall quote the Government order dated 29th January 1920. The wording of the order is that men with Indian University Degrees are not debarred, because of their non-possession of the European qualifications from aspiring at Civil Surgeon's place. "Civil Surgeons shall be recruited from persons mainly, if not exclusively, with European qualifications". This order itself shows that it does not exclude men with Indian degrees, and the principle followed up to now by Government has been to take the best men and give them promotions.

Mr. C. A. Ouseph.—May I know, what is the meaning of "if not exclusively". It is an exclusive order.

Mr. K. Mohamed Seethi.—Sir, I beg to support this motion. From the order that was just now read out to us, it is quite clear that the Civil Surgeons are mainly, if not exclusively, to be recruited from those who have got European qualifications. The inference is just the opposite of what the Hon'ble Member for Medicine wants us to draw. He says that according to the meaning of the order the cadre of Civil Surgeons will not be

exclusively kept for those with European qualifications. Is it the meaning of the order? It seems that quite the contrary is the clear meaning of the order. Apart from the order, the practice seems to be creating a convention in this matter which is as good as a rule, because if in all cases people with European qualifications are taken to act as Civil Surgeons there is no use in saying that those with Indian qualifications are not by rule prevented from holding Civil Surgeon's posts. The enabling provision by which Indians may also be taken in is "more honoured in the breach than in the observance". What is the use in having an enabling provision? It is worse than a rule excluding Indian qualifications for this reason that its existence avoids any agitation for equality and justice. I beg to support this proposition. This is a matter which deeply touches the self-respect of the Indians. It tells upon the efficiency of the Indian degrees conferred by Indian Universities. As the Hon'ble Member for Anthikad rightly pointed out, according to this rule it is quite likely that a person who is absolutely inefficient and who is possessed of European qualifications may step into the shoes of highly efficient products of Indian Universities. This would constitute an invidious distinction between Indian degrees and European qualifications based upon a popular superstition about the superiority of European degrees. Therefore I support the motion.

Dr. D. Raghavendra Rao.—Sir, there seems to be a misconception about this. The order itself as I have read it, does not exclude, nor is it the intention of the Government to exclude men with purely Indian qualifications, from aspiring to Civil Surgeon's posts. It is the duty of the Government to see that the men appointed to the Civil Surgeon's place do really have the personal qualification and other professional qualifications. Further, the Government has to decide by the experience of the persons. At present the appointment has not been permanently made. Government will give due consideration to what has been said in this House before permanent appointments are made.

Mr. E. Ikkanda Warriar.—Sir, if I understand the rule aright, it is this. Persons with Indian qualifications will not be excluded, but persons with English qualifications would be preferred. We are not in full agreement with that principle, because it is easy to cross over and get a degree if one has money. By adopting this principle you will be shutting the door against many experienced men in the department. The pay of a Civil Surgeon is Rs. 200—400 and as matters now stand, a man with Indian qualifications, however clever he might be, will not be able to rise over Rs. 200. That is the position where we are.

I do not quite agree with the proposition that there should be personal qualifications. I do not know what those personal qualifications are. I do not know what the Hon'ble Member for Medicine meant by that. My submission is, that persons possessing the requisite professional qualifications and experience should be preferred. In the light of the discussions that we had, I think that it is better that we give our considered opinion in the matter. I therefore press this motion to a division.

Deputy President.—What is your point?

Mr. E. Ikkanda Warriar.—The point is that preference ought not to be given to European qualified men, because of that qualification alone.

Mr. I. N. Menon.—On a point of information. Sir, is English qualification to be considered as one of the qualifications?

Mr. K. Mohamed Seethi.—It is no disqualification.

Mr. C. A. Ouseph.—I rise to a point of order. Now we are asked to send our motions and we are asked to give our reasons. The motion has already been sent. This is not moving a resolution. This is only a motion for reduction. Now the Member cannot bring in new points.

Deputy President.—The question is what is the point. The Hon'ble Member will please read out the point. He might not introduce new points.

Mr. E. Ikkanda Warriar.—The point is this. "Persons with foreign qualifications as such, should not be preferred to those who are otherwise qualified in the recruitments to Civil Surgeon's posts"

The motion put and carried, Government remaining neutral.

Motion No. 3.

Mr. Popatlal Lalan.—*To reduce the allotment of Rs. 44,867 for Establishment by Re. 1.*

Mr. Popatlal Lalan.—Sir, the public of Mattancheri is thankful to His Highness' Government for having decided to provide a hospital for Mattancheri Town.

This question of construction, etc., has been under consideration for a long time. From the provision made for the purpose this year, it would appear that we are not likely to realise the benefits of the proposed hospital at least for a few years to come. It is not necessary on my part to bring to the notice of this House the urgent necessity of such an institution to my Constituency. The congestion of Mattancheri and the consequent unhealthy state of the generality of the public is a matter known to everybody.

I would, therefore, most earnestly request the Government to provide sufficient amount so as to complete the construction, equipment, etc., of the hospital before the end of 1937.

Sir, I beg to submit that to bring patients from Mattancheri there is a great risk and even if we bring the patients we feel very great difficulty to get admission into the Ernakulam hospital.

I think this is also a kind of monopoly. We find that about Rs. 23,000 and odd has been spent for land acquisition, but only Rs. 7,500 is provided for the construction of buildings. I do not know whether a hospital can be constructed at this cost in this big area. I find that an invidious distinction is made in the case of Ernakulam where we have got highly qualified doctors and all kinds of facilities.

Persons who are at Mattancheri, Palluruthi and other internal parts of Mattancheri find it very difficult to bring patients to the Ernakulam General Hospital. Moreover I have seen that whenever guardians or some friends of patients come over to Ernakulam and request the Health Officers to attend patients at Cochin they say "Have you brought boat or conveyance". It is very stormy and crossing over the back-water seems to be risky" or they may say "we have to attend at present some other work in the hospital, etc." Thus they may express their inability in crossing over the backwaters in the forms of the above unreasonable excuses. It is not always possible to engage special boats to everyone at a cost of Rs. 10 or 15. In the meantime the patients' affairs will be closed.

I need not say that we are always neglected for we are on the other side of the backwater. We are treated like people outside Shoranur. This is rather very cruel to the subjects of Mattancheri.

So I request the Government may be pleased to complete the construction of this hospital and to supply all the necessary accessories at least by the end of this year.

Mr. C. L. George.—Sir, I have very great pleasure to support this motion and in doing so I have a very selfish idea. The area lying to the south of Mattancheri Town is practically neglected in point of Medical Relief and if there is a well equipped hospital at Mattancheri it will be of considerable service to the parts lying to the south of Mattancheri, especially in view of the fact that the Chief Engineer has promised road communications in the near future. This question of Mattancheri hospital has come up for discussion several times. A motion for this purpose was brought in the very first Council by the then Member for Mattancheri, Mr. S. S. Koder and I think it was then conceded by the Government that a well equipped hospital for Mattancheri is an imperative necessity. But nothing substantial has been done till now. I would therefore urge upon

the Government to immediately look into the matter. As observed by my friend Mr. Lalan, Mattancheri is a very congested and a very unhealthy place and a hospital is an urgent necessity there. With these observations, I strongly support the motion.

Dr. D. Raghavendra Rao.—Sir, the necessity for a hospital in Mattancheri is very well recognised by Government. But unfortunately for want of funds we could not provide enough for carrying on the construction this year. Several items of a similar nature had to be postponed for want of funds this year. We are constructing an operation theatre in Women's Hospital in Mattancheri. Rs. 7,000 has been budgetted for collecting materials for Men's Hospital, Mattancheri and Government will take up and finish the work in 1108.

Mr. Popatlal Lalan.—Now Government has assured that within two years, the hospital would be completed. But I think the period is too long, because within two years there may be so many deaths incurred (*laughter*). In the present medical budget we find that an item is provided viz., to send one lady doctor to Europe for getting herself highly qualified in medicines. My question is why can't we postpone all these things. If we spend that amount at least in Mattancheri we can have a hospital as early from next year itself.

Anyhow I once more request the Government to expedite this. With these words, I withdraw the motion.

The motion was withdrawn with leave of the House.

Motion No. 4.

Mr. C. A. Ouseph.—*To reduce the allotment of Rs. 2,800 for travelling allowance by Rs. 100.*

Mr. C. A. Ouseph.—Sir, before I speak on my motion, let me congratulate the Hon'ble Member for Medicine on one of the longest speeches made under any demand. It has really shown to us what the Government has hitherto done for the people and intend doing hereafter for them.

The motion which I intend moving before this House relates to transfers of medical officers, generally, as a matter of routine. This is a matter on which discussions have taken place in this House ere this. I have before me a copy of the Proceedings of the Legislative Session of 1102. I shall read to the House the order passed by the Government regarding transfers and referred to in those discussions. Government consider that it would be a wholesome rule if medical officers below the rank of a Civil Surgeon are not ordinarily allowed to remain in a place for more than three years at a time. The Chief

Medical and Sanitary Officer is requested to see that periodical transfers are suggested accordingly. That is printed as Appendix VIII. It is dated 30th November 1926.

Sir, I do not find my way to agree entirely with the idea contained in the Government Order especially with that part of it which gives permanency to Civil Surgeons, while transferring all others in the Department. I wonder what particular qualities there are in the Civil Surgeons which should demand their being kept in a place for a longer time than the other subordinate officers. I may make clear that I am not for transfer generally. I refer to that point only to show that an invidious distinction has been made between the Civil Surgeons and the other Medical Officers and that no such distinction ought to have been made. Now these Sub-Assistant Surgeons, whose transfers Government regard as a mere matter of routine are ill-paid men with very little practice. Their transfers from time to time, every third year, is a matter, I respectfully beg to submit, of great hardship, as we all know. Let us take it that we also are transferred in our respective professions from time to time, every third year. What will be the difficulties we and our families have to suffer by such transfers. If there were need for such transfers, as in the case of Judicial Officers, with a place in whose case long acquaintance is a disqualification, I can understand it. But in the case of Medical Officers, as distinguished from judicial officers, their acquaintance with the people, the surroundings in which they live, the particular diseases to which the area is generally subject to, the temperament of the people, all these qualify those men to treat with greater success the cases that are brought before them and with better satisfaction to the patients themselves. Sir, it is not a novel idea that the mind of the Doctor has much to do with recovery of a diseased person. I do not agree with the Hon'ble the Secretary to the Government in thinking that every Doctor is equally good to every patient. There is much in a Doctor.

An Hon'ble Member.—Is it so?

Mr. C. A. Ouseph.—I cannot reply to remarks which I can't hear. Now, Sir, it is a well-known fact, we all know it and the Chief Medical and Sanitary Officer will support me that doctors are often wired for from distant places. That is because every doctor is not good to every patient. In these circumstances where is the justification for this routine transfer of Medical men and women, men and women who are really ill-paid. Just consider the case of a Medical Officer, with six or seven children, in some cases a dozen, all attending schools,

transferred every third year; just look at the disturbance caused to him and the difficulty he is put to not to speak of the loss of practice. All these things go to show that, as far as possible, Medical Officers should not be disturbed. The Hon'ble Member for Medicine may say that I fail to appreciate the other point of view. There are certain places which are very bad and relief ought to be given to those who are unlucky to be sent then. But that does not justify a general transfer every third year. Relief can be rendered in such cases by occasional transfers.

Now, Sir this order was discussed in reference to Question No. 495 in that same session, by a series of questions. Both the Diwan—President and the then Member in charge of the Department were brought to admit that transfers should be resorted to only occasionally. We find at page 1069.

“President.—These circumstances are exceptional so that the rule should be not to transfer them, but order their transfer for special purposes and special reasons.

“Diwan Bahadur Dr. V. Verghese.—Yes Sir, I do not agree with the Diwan's Proceedings. I have already brought it to the notice of the Government. Specially for the information of the House I say, that in Hospitals where men have been trained to do some special work, it is quite inadvisable to transfer them once in three years. Regard should be had to the excellence of work carried on in the such Hospitals, and so it is not advisable to give effect to this rule absolutely. And so in places like Trichur, Lunatic Asylum and other places, where men have learned specialised work it is not a salutary rule at all.”

So, Sir, the then Government did come round to the view that transfers should not be effected as a matter of mere routine, but should be resorted to only if exigencies of service required. Exigencies of service I know would cover all possible sins.

If the real exigencies of service are such that transfers have to be made, nobody will protest against it. Therefore, Sir, I commend this motion for the acceptance of this House.

Dr. D. Raghavendra Rao.—Sir, Officers of the Medical Department who are entertained by Government are attached to the hospitals to look after the patients who resort to the hospitals. The idea which the Member just said about the doctors being wired for is a matter for the rich. Government employ these officers to be in charge of institutions to look after the poor suffering and the transfers which some people consider as irksome are sometimes a great boon to the others in the Department. This is a departmental detail which ought to be

left to the discretion of the Head of the Department and Government and I do not know whether this can be considered by this House. Many a time for the sake of the discipline of the department, we have to effect transfers. Sometimes the health of officers who are stationed in places which are unhealthy has to be taken into consideration and we may have to give them transfers on this score. The Member for Chittur expressed here that the Assistant Surgeons ought to be drafted to the General Hospital for post-graduate practical study. To effect this suggestion, we shall have to transfer them. Then again, there are others who are in bad stations, as the Member himself said for practice, who get discontented by remaining in that place for too long a time. We shall have to transfer them. The Hon'ble Member himself said that the Medical men are poorly paid. If we want more dispensaries in the State and if everything has to be done in a proper way, I am afraid that my Department should have a slightly bigger portion of the revenue than at present is taken up by the Education Member. We are as far as possible trying to satisfy public needs at the same time we are not taking up much of the revenue of the State. To do this and to prevent the demoralisation amongst medical men and for safe-guarding their health, I am afraid we shall have to transfer these people not as a punishment, but to give every one the opportunity for serving in different parts of the State.

Mr. C. A. Ouseph.—I could not quite understand what was meant by the Hon'ble Member when he said that there is always discontent. I did not say that the Department should not transfer even if there is discontent. But I am not satisfied that there is any discontent at all. My point is this. We have a large number of Sub-Assistant Surgeons about 45 in all. Without effecting a general transfer every 3 years, the malcontents among them can be satisfied by means of a few occasional transfers. I do not want this House to divide on this motion. I only wanted to bring this to the notice of the Government. I request the House to allow me to withdraw the motion.

The motion was, with leave, withdrawn.

Motion No. 5.

Mr. E. Ikkanda Warriar.—*To reduce the allotment of Rs. 10,800 for Lump Provision for rural dispensaries by Re. 1.*

Mr. E. Ikkanda Warriar.—Sir, I see from the Budget that provision is made for the opening of 3 new rural dispensaries next year. May I know whether there is a proposal to give one for Edakkunni or Ollur.

Dr. D. Raghavendra Rao.—Government have not yet decided at which places. There are several applications.

Mr. E. Ikkanda Warriar.—Sir, I then move for the reduction of the allotment of Rs. 10,800 for lump provision for rural dispensaries by Re. 1. My object in tabling this motion is to bring to the notice of the Government the necessity of providing a rural dispensary for Ollur or Edakkunni. Both are lying contiguous to each other and a central place may be selected for its location. I brought this pressing need to the notice of the Government last year and they were pleased to promise that provision will be made next year, and if I remember right, I think orders have been passed to that effect. At page 1829 of the Legislative Council Proceedings, Diwan Bahadur Dr. V. Verghese says "Government has already ordered to provide for that in the budget of 1107". I find that no provision is made for that in this year's budget. I submit for the information of this House the necessity still exists there. It is a small growing town with about ten or twelve tile factories and about 4 or 5 rice mills. That it is practically a very thickly populated place and it requires a dispensary will admit of no doubt. The only point that may be raised against it is that there are dispensaries at Pudukkad and Trichur and people can go to those places. There is a distance of 4 or 5 miles from Ollur to Trichur. Even though there are dispensaries at Trichur and Pudukkad and even at Urakam, my submission is that there is still necessity for a dispensary at Edakkunni. I, therefore, request the Government to give one dispensary to Ollur or Edakkunni.

Mr. T. A. Ramachandra Ayyar.—I oppose the motion. Ollur is more or less a miniature town and these dispensaries are intended for rural areas. There are places which are very badly in need of dispensaries than Ollur. Trichur is only 4 miles from Ollur, and there is bus service at an interval of every 10 minutes. Buses are running from Trichur and Pudukkad and so people from Ollur can go to those dispensaries within 5 minutes. So, what I say is that these dispensaries must be opened in rural areas and not in Ollur, which is a small town, for example, Trikkur. We were fighting for a dispensary at Trikkur for the last 6 or 7 years. That place is surrounded on 3 sides by mountains and forests and one side by a river and during the time of the floods, especially now, it is impossible for people to cross the river and go to any dispensary at all. There are such places which require dispensaries more than Ollur.

Mr. P. Krishna Menon.—Will the Hon'ble Member for Medicine tell the House which is more unhealthy?

Dr. D. Raghavendra Rao.—It is not exactly on the question of one place being more unhealthy than the other, but it is due to the inaccessibility for the people to any dispensary

that we decide more in favour of Trikkur than Ollur. Ollur is very near Trichur, and it has very easy means of communication. It is not possible for the Government to open dispensaries at such places. At present we have already 12 in number. This year we are going to open 3 more. Under these circumstances we have to meet the needs of the more deserving and wait for the less deserving. I do not think that Ollur is not deserving. But the nearness of Trichur and the easy communications of that place with Trichur make the necessity for Trikkur more pressing:

Mr. E. Ikkanda Warriar.—May I take it that the Government has decided for Trikkur or you are still keeping an open mind?

Dr. D. Raghavendra Rao.—We are still keeping an open mind.

Mr. E. Ikkanda Warriar.—Then, Sir, I shall place some more facts for the consideration of Government before they finally come to any conclusion. If a dispensary is started at Edakkunni three-fourth of the Trikkur Village will be served. Three-fourths of the Trikkur Village is on this side of the river. If the Government open the dispensary on the eastern side of the river it will not only serve not the people of three-fourths of the Trikkur Village, but of the people of Edakkunni Village also. On the other hand, if you locate the dispensary at Edakkunni which is a central place and from which there is only 2 miles to the Trikkur river, it will serve a larger number of people. There are no factories or mills in Trikkur. There are many in Ollur and Edakkunni. Accidents may occur on every day. The argument that there is bus service between Trichur and Edakkunni is irrelevant for the consideration of this question. Motor cars are intended for the rich. They may not care whether there is a rural dispensary or not. If I understand aright rural dispensary is intended for the poorest of the poor. They cannot afford to go in motor buses to Trichur or Pudukkad. On the other hand, most of the people on the other side of Trikkur, is on the eastern side of the Trikkur river and can go to Pudukkad which is only 3 miles from there. There is a short direct road through which they can go without crossing the river. And after all the river will be in floods only for one month or so in the year. I am afraid that Trikkur stands more in need of a bridge than a rural dispensary. If you give them a bridge, you will never hear this cry. I hope that the Government will consider all these facts before coming to a conclusion. The fact that Ollur is a growing town is in itself a recommendation for having a dispensary there.

I do not grudge your giving a dispensary to Trikkur, but I really do not understand the mentality of my friend who opposed this motion. I can very well understand the Hon'ble Member for Nellore requesting for a dispensary at Trikkur. But I cannot understand his mentality in opposing the measures calculated to give medical aid on the ground that he wanted one in his place. The Government can give him also one. On the other hand, if you give one to Trikkur without giving one to Nellore, the latter will for a very long time be deprived of the benefits of a dispensary. I, therefore, request the Government to consider the comparative merits of these two proposals before they finally pass orders. In view of the assurance given to me that the Government will consider these points sympathetically, I beg the leave of the House to withdraw the motion.

The motion was, with leave, withdrawn.

Deputy President.—Now, I have to bring to the notice of the Hon'ble Members that if they don't cut short their speeches we will have to put all the demands in a lot.

Motion No. 6.

Mr. A. Eachara Menon.—*To reduce the allotment of Rs. 2,78,381 for Hospital by Re. 1.*

Mr. A. Eachara Menon.—I have tabled this motion to request the Government to arrange for location of a dispensary at a central place to the easternmost part of my constituency. Now that the Chief Medical Officer has said that he has intended to open Ayurvedic dispensaries, my only request now is that he may be pleased to consult the Presidents of the 3 Panchayats and myself when he locates the dispensary.

Dr. D. Raghavendra Rao.—They will be consulted.

Hence the motion was considered withdrawn.

Motion No. 7.

Mr. A. Sankara Menon.—*To reduce the allotment of Rs. 34,336 for Leper Asylum by Rs. 11,000.*

Mr. A. Sankara Menon.—Sir, I sent notice for this motion in order to elicit certain information regarding the Leper Asylum at Adoor. The Hon'ble Member has been good enough to give me all the information and I do not move the motion.

Hence the motion was considered withdrawn.

Motion No. 8.

As the following motion was not moved it was also considered withdrawn.

Mr. M. A. Chakko.—*To reduce the total allotment of Rs. 3,28,243 under Demand No. XXII by Re. 1.*

Motion No. 9.

Mr. E. Ikkanda Warriar.—*To reduce the total allotment of Rs. 3,28,243 under Demand No. XXII by Re. 1.*

Mr. E. Ikkanda Warriar.—Sir, my object in tabling this motion is to bring to the notice of the Government the necessity of giving more encouragement to the system of Ayurvedic treatment. This cry had been raised from the very first year of the Council.

Deputy President.—Is this a cut to be moved now or to be moved under Panchayats?

Mr. E. Ikkanda Warriar.—Sir, I sent notice of this motion and I have not yet received any notice that it has been disallowed.

Sir, I have deliberately brought this cut motion here, because I knew that we will not reach the Panchayat Department for want of time and this all important question will not have been reached at all. This is a subject dealing with medicine and I thought that the subject matter of my motion can be thrust in here. The importance of this subject has been hammered in this House for the last 6 years. The Government had been pleased to promise liberal help and encouragement to this system. There was a resolution for the establishment of an Ayurvedic College and a Central Ayurvedic Hospital. All these resolutions the Government used to accept. We were also going back with the pious hope that the Government will give effect to these resolutions. This year in answer to one or two questions, they have said that their energies are directed to giving help to the K. A. Samajam at Shoranur. That Samajam very recently applied for a small grant of about 300 rupees or 150 rupees for starting an Ayurvedic school on a small scale. They found that the Government were not taking any initiative in this matter. They were prepared to spend some money from their pockets. They only wanted a very small help. Even that was refused on the ground that there is a better Ayurvedic College at Madras or some other place where our students can go. If there are people who can go and learn in these Colleges they will go. And some are actually going there. The Samajam thought of making provision on a smaller scale to provide for the teaching of medicine to those who cannot afford to go to Madras. And another very modest request, I understand, had been made by that institution and that was for the grant of a few acres, about 8 or 9 acres of land for a garden for growing the medicinal herbs. There are ever so many waste lands in the locality and the Government can very easily acquire and give them a few acres at moderate cost and encourage that system of medicine. Even this they did not think it fit. All that they were doing towards the improvement of this system of medicine was probably the giving of some grants to

some rural dispensaries, which I am afraid, were not even supervised efficiently. Whatever that be, this motion is brought to impress upon the Government the necessity of giving some more encouragement to the Ayurvedic system of treatment. With these words, I commend this motion to the acceptance of this House.

Mr. P. S. Kesavan Nambudiri.—Sir, I support the motion. In my general budget speech I had mentioned about the necessity for encouraging Ayurvedic system of treatment. The Government was spending only a small sum in this line when compared with the large amount they are spending in English medicines. For example they are spending more than 4 lakhs of rupees for English medicines while the amount spent for Ayurvedic medicines is only some 15 thousand rupees. Compared with the large amount spent on English medicines it is nothing but a trifle. Therefore if you see to the real needs of the country you can understand that the people of the country parts are resorting more to the native physicians than to English doctors. Especially in the country parts, they have more faith in the Ayurvedic treatment, particularly in cases where no surgical operations are necessary. Only very few people go to the English doctors and if at all they do it, it is only on account of the fact that they cannot get free medicines from the Panchayat Vaidyasalas. After all there are only a very few Vaidyasalas, in the State—say about 16 and they have now opened one more. Now, for the encouragement they give to the Ayurvedic system of treatment in the budget we find the head “stipends.” But when we come to the actual expenditure we do not find any amount allotted for the same. There they are giving more than 4,000 or 5,000 rupees for scholarships in the study of English medicines. But they are not even spending a single pie for the study of the Ayurvedic system. It is only a step-motherly attitude of the Government. The Government ought to give more encouragement in this line. Therefore I support this motion.

Mr. M. A. Chakko.—Sir, I rise to oppose the motion. The principal reason that struck me that I should speak to oppose the motion is because the Hon'ble Member for Urakam was vehemently pressing for a dispensary in Ollur, when the Ayurvedic Physician Vaidyaratnam Thykattusseri Moosad is living only a mile from Ollur. He is the most efficient physician in Ayurvedic way of treatment. He lives within a mile from the Ollur town and he is accessible to all, at all times of the day or night. Even the Hon'ble Member for Urakam was fighting the Hon'ble Member for Nellore to snatch away that dispensary to Ollur.

from Trikkur. From that we see that we have not much faith in the Ayurvedic system of treatment, and that we are only talking here to blame the Government for not doing this thing and that thing. I should think that in order that the Ayurvedic treatment might have some effect and serve a useful purpose for the public, the physicians must make it a vocation or a profession. Many of these Ayurvedic physicians are not devoting their time entirely for that work at all. It is a hobby with many of them. If the Government help these people to mature and carry on their hobbies more easily, I think it will not be as useful to the public, as helping those who are devoting themselves wholly to the Allopathic treatment about which the people have greater faith in these times. When the Government had some more dispensaries to be opened everybody wanted a dispensary to be opened within his native village or very near to it. But there have been very few applications brought to the Government to have an Ayurvedic physician trained and sent to that village so as to look to the needs of the people. Therefore I do not think that the spending of much money on Ayurvedic physicians will be useful to the people of the State taken as a whole. At the same time I do not condemn the Ayurvedic medicines at all. (*Hear, hear*) It has a purpose to serve. The Government should encourage professional men to devote more time to the development of the Ayurvedic method of treatment, rather than diffuse their money to help and encourage those people to carry on their hobbies who devote their time to something else while getting grants from the Government as a sort of pension. For these reasons I oppose the motion.

Mr C. L. George.—Sir, I wish to support this motion and I do not agree with the Hon'ble Member for Vellarappilli when he suggests that the Allopathic system is more effective than the Ayurvedic system. The Ayurvedic system is perhaps more suited to our climate as well as to our bodily conditions. (*Hear, hear*). The only defect with the Ayurvedic system is that it has not been developed in a sufficiently good form. The one service I should ask the Government to do to the Ayurvedic system is to exterminate at once the large gang of quacks who go about here and there under the name of Ayurvedic physicians and spoil its precious name. I would suggest to the Government that the first method of improving the Ayurvedic system of treatment in the State will be making it penal for these gang of people to go about spoiling the great name of the great science and causing danger to human life. Some provision must be found out to stop this. I would draw the attention of the Government first to the necessity of improving the system of treatment by having

an institution where proper training could be given to it but a few in the Ayurvedic system rather than starting Government dispensaries here and there. According to me the very first thing that the Government has to do to start a training institution where eminent men in Ayurvedom like the Hon'ble Member for Vyttila who is here, will be given opportunity to train up men in that line. Reference was made here to the Ayurvedic Physician Vaidyaratnam Moosad. Such eminent men may be encouraged to form a central institution where proper training could be given in the Ayurvedic method of treatment, and with the co-operation of such men I should think the State will be well advised in immediately starting an institution to train up men, so that it may be more profitable both to the system and to the people. If the Government can immediately direct their activities towards organizing a system and bringing about an efficient staff of Ayurvedic physicians, I think it will go a great way for preventing this band of so-called Ayurvedic physicians, who now parade under the name of that great science and spoil it.

Dr. K. Sankara Menon.—In supporting the motion I have to point out the urgent necessity of reorganising this department. Now only certain grants are given to certain persons whose knowledge of science or whether who know the science at all is a question which has not been decided. They might have been examined by some people and grants are given to them for want of efficient men in the country. There is not at all a department even now. Only some grants are given to some hospitals and dispensaries run by people who have no theoretical and practical knowledge of the subject. As such, if such a vaidyan has erred, it is not his fault, it is not the fault of the science, but it is the fault of those who are responsible for giving such grants; and on that ground the system should not be condemned. First of all the duty of the Government is to organise a department where efficient Ayurvedic training is given in theory and practice to competent men and women. And after a course of training which is sufficient to enable them to understand the theoretical and practical portions of the science and treatment according to Ayurveda and after having understood all the complications thereof, they become fit to receive Government aid in the shape of grant or pay. To achieve that end a College should be started with all necessary equipments. There is the Sanskrit College at Trippunittura which unfortunately is not opened to all classes of people. First of all it must be made a Government College where all these sciences should be taught, on more liberal scale. The College or the Patasala as it is

called now, is run on private funds. It should be accessible to all classes and all the Indian sciences should be taught there under proper guidance and supervision. Cochin being practically a very enlightened country where all Indian sciences are very prominent, it is the first duty of Cochin Government to give their very best attention to the proper promulgation of these sciences which can be easily done by opening classes for all sciences in the Sanskrit College. And to that College also can be appended an Ayurvedic Hospital where clinics can be taught to the students who receive theoretical lessons. Ayurveda, Archaeology and similar other groups may be combined to form a department of Oriental Studies. Unless and until some effective steps are taken, it is useless to condemn the system or condemn a set of people who are not given the necessary equipment or education. If all these things are carefully done and the system has been brought up to its original condition, I have no doubt that the Vaidyans who come out of the College will be found very useful to the public.

As far as my personal experience is concerned, nothing can be said against that system; it certainly serves very useful purposes. In Travancore the system has been very much appreciated by the public. There is an Ayurvedic Hospital started in Trivandrum. It has been doing very useful work and many people from different parts of India resort to that institution for medical aid. It is an eloquent testimony that the work done by the hospital at Trivandrum is useful in as much as any number of persons from different parts of India resort to it for medical aid even to this day.

Ayurveda must be admitted to possess something very good and useful in that system. But on account of so many reasons which need not be explained here and the step-motherly attitude of the Government to this indigenous system it has gone down to this stage. It is not the fault of the system. But the way in which it is looked at and the way in which it is neglected is responsible for its present condition. If the Government are going to do anything tangible and practical in this line, they must do it with whole-heartedness and spend some money for the proper regeneration of this ancient system. Otherwise it is useless.

I do not think that much useful purpose can be served by giving a few grants here and there. First of all, there is no method of testing the practical knowledge of the Vaidyans. Visha Vaidyans who are without any ostensible knowledge of the subject are given grants in a few places. And here the science itself is so very difficult that a person or a candidate selected by the State without any examination cannot serve any useful purpose.

So, my request is that the Sanskrit College should be extended to all classes of people and Sanskrit education should be given on a more liberal scale. A knowledge of Sanskrit is essential for the knowledge of Ayurveda. In the early stages Sanskrit Education may be given and when they have a sufficient grounding in the language, the candidates may be asked to specialise in those subjects for which they have a natural affinity or aptitude. A sound practical and theoretical knowledge will enable the Vaidyans to serve the public with efficiency and usefulness. The Hon'ble Member for Medicine just now remarked that persons or patients escaped from Ayurveda down to sorcer resort to General Hospital for medical aid. If he meant from A to Z he could have said it from Allopathy to zebra rather than from Ayurveda to sorcer. I have no doubt that Allopathy and zebra represent what the Hon'ble Member means by Ayurveda to sorcer.

Mr. M. K. Raman.— I was very sorry to hear the Hon'ble Member for Vellarappalli speaking rather in slight terms of the Ayurvedic system. If the Ayurveda system cannot cope with the Allopathic system of treatment in the present day, I daresay it is not due to the defect of the Ayurvedic system, but because there are not men sufficiently trained in that line. Over and above that, there is the very great advantage that all medicines according to the Ayurvedic system of treatment are less costly than the European treatment. In fact, I think there are very many instances where so far as we Indians are concerned, the Ayurvedic system is more effective. Without going to England or without getting any European degree or any of these qualifications, we find ordinary men among us attaining sufficient proficiency in that branch of knowledge, and there are several in our State who have established fame throughout South India. I think there are several eminent men here who have been able to command the admiration of all the South Indians. That itself shows that the system of treatment, if it is properly applied, is probably the most efficacious. Unfortunately, as was pointed out by the Hon'ble Member for Palluruthi there are lots of people who have without getting sufficient training in that, line more or less have brought discredit upon that useful system. In fact, the burden lies very heavily upon Government to revive that system which would be much better and more easily accessible to all. In that case, probably the Member for Medicine will not come forward with such a large budget. If only we spend half the sum or even a 1/10th of the sum on the Ayurvedic system, I am certain that the people of our State will be amply satisfied. I would, therefore,

very strongly request the Government that some encouragement should be given to the Ayurvedic system. As was suggested by the Hon'ble Member for Vyttila, an institution may be opened for the purpose of training people properly and licenses or certificates be issued and only persons who obtain such permission or licenses from such institutions should be allowed to practise the Ayurvedic system.

മിസ്റ്റർ കെ. അയ്യപ്പൻ.—ഞാൻ ഈ മോഷനെ എതിർക്കാനോ അനുകൂലിക്കാനോ അല്ല പോകുന്നത്. ആയുർവ്വേദത്തെപ്പറ്റിയും അലോപ്പതിയെപ്പറ്റിയും തെറ്റിദ്ധാരണ വരുന്ന പലവിധ അഭിപ്രായങ്ങളും ഇവിടെ പുറപ്പെടുവിച്ചുകൊണ്ടു ചില സംഗതികൾ പറയാനുണ്ട്. ആയുർവ്വേദം നല്ലതുപോലെ പഠിപ്പിക്കാൻ അതുകൊണ്ടു ജനങ്ങൾക്കു ഉപയോഗമില്ലെന്നുള്ള സംഗതി പലരും സമ്മതിച്ചുകഴിഞ്ഞിരിക്കുന്നു. ആയുർവ്വേദം ഇൻഡ്യയിൽ പലേടത്തും ഉദ്ധരിക്കാൻ തുടങ്ങിയിരിക്കുന്നത് ഒരു അബദ്ധമായ അഭിപ്രായത്തെത്തന്നെയാണ്. “ബ്രഹ്മാസ്മൃതപായുർവ്വേദം പ്രജാപതിമജിഗ്രഹീത്” ബ്രഹ്മാവു ആയുർവ്വേദം വിചാരിച്ചു പ്രജാപതിയെ പഠിപ്പിച്ചെന്നാണ് ഇക്കൂട്ടർ പറയുന്നത്. അതിനാൽ ഒരു മാറ്റവും ആയുർവ്വേദത്തിന്നു വരുത്താൻ പാടില്ലെന്നാണ് അവരുടെ നിർബ്ബന്ധം. വടക്കെ ഇന്ത്യയിലെ മൺബർ പാർലമെന്ററുടെ പ്രാചീനമായ ആയുർവ്വേദം ഉദ്ധരിക്കണമെന്നാണ്.

ഈ മനസ്സാൽ വെച്ചല്ല ആയുർവ്വേദം അഭിവൃദ്ധിപ്പെടുത്താൻ ശ്രമിക്കേണ്ടതു്. സയൻസുകളെല്ലാം പുതിയ പുതിയ അന്വേഷണങ്ങൾക്കൊണ്ടും മാറ്റം അഭിവൃദ്ധിപ്പെട്ടുകൊണ്ടിരിക്കുകയാണ്. ഒരു സയൻസിനും പരിപൂർണ്ണസ്ഥിതി ഒരിക്കലും വരില്ല. ആയുർവ്വേദവും ഒരു സയൻസായി അഭിവൃദ്ധിപ്പെട്ടെങ്കിലെ അതുകൊണ്ടു പ്രയോജനമുള്ളു. ആയുർവ്വേദം പണ്ടു മഹർഷിമാർ പരിപൂർണ്ണമാക്കി എന്ന തെറ്റിദ്ധാരണയെത്തന്നെ തുടങ്ങുന്ന ഒരു പരിഷ്കാരവും ആയുർവ്വേദത്തിന്നു ഗുണം ചെയ്യുന്നില്ല.

Mr. K. Mohamed Seethi.—I support this motion and in doing so I may respectfully submit that the system of Ayurveda and other indigenous systems of medicine are very ill-equipped and least encouraged by the State with the result that they don't afford any kind of attraction which the highly encouraged and highly manned and well-equipped system of Allopathy holds out to the general public. Ayurveda is labouring under two difficulties. As far as I can understand, one of which is its lack of facilities for providing ready made medicines. The system is lacking in pharmacies where medicines are prepared and stocked. If a patient is suffering from some complaint, and if an Ayurvedic doctor is called, what he does is to give a recipe for a decoction or a mixture which would necessitate the

c collection of a number of herbs. With an Allopathetic physician on the other hand the preparation of a mixture means no time. This difficulty with Ayurveda should be removed by having a large number of druggists' shops for the Ayurvedic medicines. The other difficulty is the imperfection of science in the matter of surgery. We don't have in Ayurveda the surgical facilities which obtain in Allopathy. Whether there are no provisions in the science of Ayurveda for surgery is a matter which I don't know myself; for I have heard from some Ayurvedic physicians that there is a branch of surgery in Ayurveda. We do not find that branch anywhere developed. If the Government afford facilities for the development of Ayurveda by the combination of surgical operations with the system and the opening of medical stores it will be a boon to the public. Whether the system was taught by Brahma or any other is not our concern. Whether the system is useful to the public should be our sole consideration. I don't hold any brief for Brahma or Anti-brahma, but I should support any move that will encourage indigenous systems of medicine which are bound to be more beneficial and agreeable to our people than Allopathy.

Dr. D. Raghavendra Rao.—It is very unfortunate that I should be called upon to deal with a subject about which I profess to know very little. Still in formulating a policy which has been adopted of late, I might read a few remarks written by a committee that was started by the Madras Government. It runs thus:—

“A few of the votaries, that I came across were able to exhibit their knowledge by repeating by heart verses from the well known Sanskrit writers like Sushruta, Vagbhada, Madhava and also verses from Augustier, one of the most reputed of the Tamil saints who wrote several volumes in verse on Hindu medicine and philosophy. In vain have I attempted to find any drug or medicine whose reputed marvellous properties are shrouded in mystery or have not been already known.

Again he says, “These Tamil works or shastras are said to be less shackled with the mythological doctrines of the original Ayurveda, to contain a great number of formulæ and to show a minute attention to the discussion of morbid symptoms. But they also, like the original Ayurveda, evince a firm conviction and belief in the intervention of evil spirits, and offer many curious and absurd rules for averting their machinations. The path of investigation is beset with many embarrassments and difficulties.”

Then again take for instance the properties and uses of the ordinary ‘Kadukkai’. Its properties are said to be “Astringent” indifferently sweet, pungent, sour, bitter, possesses healing powers, promotes digestive powers, digests food lying undigested in the stomach, prolongs the period of youth, laxative, preserves and prolongs life, strengthens memory, increases vital powers, cures leprosy, discolouration of skin, loss of voice, chronic fevers, poisonous fevers, disease of brain, eye, disease, anaemia, heart disease, jaundice and grahami, consumption abdominal tumours, dropsy, dysentery,

swooning, morbid secretion of urine, asthma, cough, excessive salivation, piles, enlarged spleen, flatulence, ascites, colic lumbago, loss of taste, and other diseases arising from the derangement of phlegm and wind humours."

Mr. George Chakyamuri.—Is this Committee composed of Ayurvedic doctors or Allopathic doctors?

Dr. D. Raghavendra Rao.—This is written by a Committee appointed by the Madras Government.

Mr. K. Ayyappan.—Who wrote that report?

Dr. D. Raghavendra Rao.—Dr. Koman.

Mr. K. Ayyappan.—Was he well versed in Ayurveda? He simply examined witnesses.

Dr. D. Raghavendra Rao.—With the help of Ayurvedic physicians he describes it.

Dr. K. Sankara Menon.—Has the Hon'ble Member read the second report of the Madras Committee?

Dr. D. Raghavendra Rao.—I am just coming to that. Considering the period at which their works were written, it must be said that such skill was exceedingly creditable to those great and erudite authors, but I am constrained to observe here that their hypothesis with reference to the classification and aetiology of diseases is entirely out of date and will not stand the test of the rational science of the present day. Another difficulty I had to encounter was in procuring reliable individual drugs dry or fresh from the bazaar. In the case of several drugs, I had no previous experience and had to verify them by description taken on trust from others".

One Member said about the cheapness. "The cost of important compound drugs prepared by vaidyans and hakims is in several instances almost prohibitive and it would not be possible except for the well-to-do to undergo treatment by such drugs. Enquiries were made of the hakims and vaidyans to ascertain if they had specific or general treatment."

Again he says, "I have not found anything new to modify the opinion which I gave about them in my preliminary report."

This was the opinion given originally and second to that, another Committee met and investigated and it is as a result of that the Indian School of Medicine was started. (*Hear, hear*).

Much has been said here about the starting of a school within the State. I am not against such an institution. The proposal of the Keraleeya Samajam Board is before the Government. They have been asking for many things and myself and the Diwan Peishkar went to the spot, inspected several of the buildings and we made certain recommendations. It is true that we have not been able to grant them all their requests but again the Keraleeya Ayurvedic Samajam have requested the Durbar to take charge of the Hospital at Cheruvirutti and run it the cost of the State. This proposal is before the Government

and is being considered. The Government has not formed any definite conclusion as yet. As regards the school that some of the Members thought of starting, with all due reverence, I must say it is going to be a mimicry. Because, for starting a school, a State with our resources will not be able to do it on any scale useful to the public. For instance, I asked one or two well-known reputed physicians of the place whether they could come and spend their time to teach these students. They told me 'no'. I don't blame them. The cost of running a school which will turn out men who will be useful will be prohibitive. One does not know the amount that is necessary for running one of such schools in the Presidency. A lot of clinical material is necessary for running a big hospital. It is not enough if you train them in a few diseases. We have to give them a good grinding in all the different aspects of Ayurveda for which we must have a big outlay. I am not condemning the system. I found during my circuit through the different parts of the State people asking for Allopathic dispensaries. I used to tell them "Suppose we give you an Ayurvedic dispensary, will you be satisfied?" In no case have I heard the public of the place preferring the Ayurvedic dispensary to a Rural Dispensary. Government is not against doing it. But at the same time I should explain the position of the Government that it is not possible for a State like ours, with its meagre resources, to start an Ayurvedic school for any useful purpose.

Mr. E. Ikkanda Warriar.—Sir, my motion is not for the specific purpose of starting an Ayurvedic College or an Ayurvedic school. But my motion was only to draw the attention to the fact that the Government ought to give more encouragement to this system and to tell them that the attention they have paid so far had not been adequate. One of my first recommendations would be that the Medical Department, as at present constituted should not be given any voice in this matter. It must be handled by persons who have some respect and sympathy for the system, some reverence for that science. So long as it is allowed to be dealt with by persons like the Hon'ble Member for Medicine, the system will never grow in the State. What is the position of the Government in this matter? So far as I can analyse it, it is this. The Government cannot go in for a college or school. The expense will be prohibitive. At the same time, they cannot also find their way to grant a very modest request for Rs. 300 for an institution which will train up half-a-dozen boys, however inadequately it may be. Because they think it will be a mimic school. If this won't serve the purpose at all, why not give them a thousand rupees and ask them to start a

better one? I understand that this Ayurvedic institution is run under the direct supervision of one of the most eminent physicians of the day.

Mr. I. N. Menon.—I want to furnish just one small bit of information. I am sorry to have to interrupt. It cannot be said of course, that nothing is being done for opening up of schools. Whether the training is sufficient or adequate I cannot say. And we have proposed to introduce the teaching of Ayurveda to a certain extent. The department cannot undertake the whole work.

Mr. E. Ikkanda Warriar.—Theory, there is plenty here. The complaint raised by the Hon'ble Member for Pallivirutti is that no practical use is made of the theory which some of the cracks possess. What they generally do is, to learn by heart some of the slokas. They must learn the science in a scientific manner. They must be helped by persons who have learned the system and who have sympathy with that system and not persons who do not really like the system. It is with this object that I sent this motion. I therefore think it absolutely necessary to press the motion to a division so as to make the Government understand that they ought to take a little forward policy and that they ought to give a little more encouragement to this system of medicine. I therefore beg to press the motion to a division.

Mr. George Chakyamuri.—May I know the exact point? I think it is noted on the cut that they should give more encouragement to the system of Ayurveda.

Deputy President.—To bring to the notice of the Government the necessity of giving more encouragement to the Ayurvedic system of treatment with particular reference to the turning down of the recent request of the Keraleeya Ayurvedic Board.

Dr. D. Raghavendra Rao.—On a point of information. I have already told the Member that the request of the Kerala Ayurvedic Board is before the Government and that the final orders are not passed.

Mr. C. A. Ouseph.—How long?

Rama Varmha Tampuran.—About a month or a month and a half.

Dr. D. Raghavendra Rao.—The correspondence has come on the 21st of July. I have to go there after the Council meeting.

Mr. E. Ikkanda Warriar.—That is only by way of illustration of the policy of the Government. The main issue is inadequacy of the encouragement.

Deputy President.—Does the Hon'ble Member press the motion?

Rama Varmha Tampuran.—If it is only a general motion that more encouragement should be given to the Ayurvedic system of medicine, Government accepts that policy. Is it on any special point raised?

Mr. E. Ikkanda Warriar.—I don't raise any specific point.

Rama Varmha Tampuran.—Then there is no difference of opinion.

Deputy President.—Does the Hon'ble Member press his motion?

Mr. E. Ikkanda Warriar.—In view of the assurance given by the Hon'ble Secretary, I don't wish to press the motion to a division. If the Government is for giving more encouragement to that system, I am not for pressing.

The motion was withdrawn with leave of the House.

Motion No. 10.

Mr. P. Kumaran Ezhuthassan.—*To reduce the total allotment of Rs. 3,28,243 under Demand No. XXII by Re. 1.*

May I know from the Hon'ble Member for Medicine whether arrangements will be made soon to treat anti-rabic cases in Trichur. I think I heard him saying that arrangements are going to be made.

Dr. D. Raghavendra Rao.—We are making arrangements with the Pasteur Institute at Coonoor for carrying out treatment at Trichur and we have been corresponding with them. Final orders have not been passed. We propose to start as early as possible.

Mr. P. Kumaran Ezhuthassan.—Government is for introducing.

Hence the motion was considered withdrawn.

Motion No. 11.

Mr. P. Kumaran Ezhuthassan.—*To reduce the allotment of Rs. 3,28,243 under Demand No. XXII by Re. 1.*

Mr. P. Kumaran Ezhuthassan.—This is to request the Government to provide for an operation room in the Vadakkancheri Dispensary, where I find minor operations being conducted in the open verandah. That is a thing which has to be stopped at the earliest date. Some arrangements ought to be made.

Dr. D. Raghavendra Rao.—Sir, as per orders of the Government, I was asked to go and inspect all the institutions and submit my proposals for improving the different institutions

and the item suggested by the Member for Mulakunnattukavu is one. But unfortunately for want of funds it had to be postponed.

Mr. P. Kumaran Ezhuthassan.—I don't press it.

The motion was withdrawn with leave of the House.

Motion No. 12.

Mr. P. Kumaran Ezhuthassan.—*To reduce the total allotment of Rs. 3,28,243 under Demand No. XXII by Re. 1.*

Mr. P. Kumaran Ezhuthassan.—May I know from the Government whether all rural dispensaries are to be given mid-wives?

Dr. D. Raghavendra Rao.—Only eight mid-wives were sanctioned this year. Eight more are sanctioned for 1107.

Mr. P. Kumaran Ezhuthassan.—Then I don't move.

Hence the motion was considered withdrawn.

Motions Nos. 13—15.

As the following motions were not moved, they were considered withdrawn.

13. **Mr. P. Kumaran Ezhuthassan.**—*To reduce the allotment of Rs. 3,28,243 under Demand No. XXII by Re. 1.*

14. Do do do

15. **Mr. T. A. Ramachandra Ayyar.**—*To reduce the allotment of Rs. 4,21,000 under Demand No. XXII by Re. 1.*

Motion No. 16.

Mr. A. Sankara Puduval.—*To reduce the total allotment of Rs. 3,28,243 for Medical—votable amount by Re. 1.*

Mr. A. Sankara Puduval.—Sir, time being limited, I will barely state the objects with which I have sent this cut motion. Greater attention deserves to be paid on the preventive side of medication. Secondly, Government will be pleased to pay greater attention to our out-patients, and remember that charity begins at home. Our hospitals, are flooded with foreign patients. Except in the case of accidents, preference should be given to our patients, both as in-patients and out-patients. In regard to the purchase of drugs and medical accessories and of surgical instruments, the Tender system resorted to by the Public Works Department may be adopted. The tenders offered by Cochinites should be given preference. We want the best sort of medicines and accessories. Government would have a hold on these people. The catalogue prices of firms may not have to be paid when the tender system is adopted. Lastly, in regard to the staff of the Medical Department all facilities may be given to them regarding privileges which they originally enjoyed and they may be given sufficient latitude in the discharge of their duties, consistent with the discipline of the Medical Department.

Dr. D. Raghavendra Rao.—As regards medical supply, tenders were called and tenders came from various firms. It is well-known that nobody in Cochin State manufactures drugs. There are only dealers in drugs and the policy that is hereafter going to be followed is to give it to the person who bids the lowest tender consistent with quality. And as such, we are going to place tenders directly with the manufacturers who have quoted the lowest figures.

The motion was withdrawn with leave of the House.

Deputy President.—Now we have to stop and put demand after demand.

Question put:—*that the demand minus Re. 1 be voted by the House.*

Demand minus Re. 1 was carried.

16. Medical—Cranganur—Rs. 4,582.

Dr. D. Raghavendra Rao.—Sir, I rise to move the House for a grant of Rs. 4,582 under Cranganur—Medical.

The motion was put and carried.

XXIII.—Vaccination—Rs. 8,800.

Dr. D. Raghavendra Rao.—Sir, I rise to move the House for a grant of Rs. 8,800 for vaccination.

Motion No. 1.

The following motion lapsed under rule 49 (3).

Mr. T. K. Nayar.—*To reduce the total allotment of Rs. 8,800 under Demand No. XXIII by Re. 1.*

The Demand was put and carried.

17. Vaccination—Cranganur—Rs. 1,060.

Dr. D. Raghavendra Rao.—Sir, I rise to move for an allotment of Rs. 1,060 under Vaccination, Cranganur. I request the House to sanction the allotment.

The motion was put and carried.

XXIV—Sanitation and Conservancy—Rs. 69,864.

Dr. D. Raghavendra Rao.—Sir, I rise to move the House for an allotment of 69,864 under Sanitation and Conservancy. I request the House to sanction the allotment.

The following motions lapsed under Rule 49 (3).

Motions Nos. 1—10.

1. **Mr. Paul Mampilli.**—*To reduce the allotment of Rs. 4,750 for Sanitation Works by Re. 1.*

2. **Mr. A. Sankara Puduval.**—*To reduce the allotment of Rs. 16,000 for Trichur Town Improvement works by Re. 1.*

3. **Mr. Popatlal Lalan.**—*To reduce the allotment of Rs. 43,500 for Sanitation works by Re. 1.*

4. **Mr. K. Ayyappan.**—*To reduce the allotment of Rs. 31,417 for Rural Sanitation by Re. 1.*